U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN
See _"Instructions for Service of Process by U.S. Marshal"_

PLAINTIFF William Moore	COURT CASE NUMBER 3: 19-cv-1977
DEFENDANT Kevin Bishop Warden	TYPE OF PROCESS Complaint

NAME OF INDIVIDUAL, COMPANY, CORPORATION. ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN

SERVE AT { Wayne county Prison

ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)

44 mid Wayne Dr   Henesdale PA 18431

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

William moore
44 mid wayne Dr
Henesdale PA 18431

Number of process to be served with this Form 285	1
Number of parties to be served in this case	1
Check for service on U.S.A.	

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (_Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service_):

Fold

Individual capacity

Fold

Signature of Attorney other Originator requesting service on behalf of:	☑ PLAINTIFF ☐ DEFENDANT	TELEPHONE NUMBER none	DATE 11.6.19

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process	District of Origin No. ____	District to Serve No. ____	Signature of Authorized USMS Deputy or Clerk	Date

I hereby certify and return that I ☐ have personally served , ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual , company, corporation, etc., at the address shown above on the on the individual , company, corporation, etc. shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (_See remarks below_)

Name and title of individual served (if not shown above)	☐ A person of suitable age and discretion then residing in defendant's usual place of abode

Address (complete only different than shown above)	Date	Time	☐ am ☐ pm
	Signature of U.S. Marshal or Deputy		

Service Fee	Total Mileage Charges including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*)
					$0.00

REMARKS:

AO 398 (Rev. 01/09) Notice of a Lawsuit and Request to Waive Service of a Summons

UNITED STATES DISTRICT COURT
for the
Middle District of PA

William Moore_____)	
Plaintiff)	
. v.)	Civil Action No. 3:19-CV-1977
Kevin_____)	
Defendant)	

NOTICE OF A LAWSUIT AND REQUEST TO WAIVE SERVICE OF A SUMMONS

To: _Kevin Bishop_____
(Name of the defendant or - if the defendant is a corporation, partnership, or association - an officer or agent authorized to receive service)

Why are you getting this?

A lawsuit has been filed against you, or the entity you represent, in this court under the number shown above. A copy of the complaint is attached.

This is not a summons, or an official notice from the court. It is a request that, to avoid expenses, you waive formal service of a summons by signing and returning the enclosed waiver. To avoid these expenses, you must return the signed waiver within _____ days *(give at least 30 days, or at least 60 days if the defendant is outside any judicial district of the United States)* from the date shown below, which is the date this notice was sent. Two copies of the waiver form are enclosed, along with a stamped, self-addressed envelope or other prepaid means for returning one copy. You may keep the other copy.

What happens next?

If you return the signed waiver, I will file it with the court. The action will then proceed as if you had been served on the date the waiver is filed, but no summons will be served on you and you will have 60 days from the date this notice is sent (see the date below) to answer the complaint (or 90 days if this notice is sent to you outside any judicial district of the United States).

If you do not return the signed waiver within the time indicated, I will arrange to have the summons and complaint served on you. And I will ask the court to require you, or the entity you represent, to pay the expenses of making service.

Please read the enclosed statement about the duty to avoid unnecessary expenses.

I certify that this request is being sent to you on the date below.

Date: _____

_____
Signature of the attorney or unrepresented party

_____
Printed name

_____
Address

_____
E-mail address

_____
Telephone number

AO 398 (Rev. 01/09) Notice of a Lawsuit and Request to Waive Service of a Summons

UNITED STATES DISTRICT COURT
for the
Middle District of PA

William Moore _____ Plaintiff v. Wayne county Prison _____ Defendant	))) Civil Action No. 3:19-CV-1977))

NOTICE OF A LAWSUIT AND REQUEST TO WAIVE SERVICE OF A SUMMONS

To: __Wayne county Prison_____

(Name of the defendant or - if the defendant is a corporation, partnership, ar association - an officer or agent authorized to receive service)

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I certify that this request is being sent to you on the date below.

Date: _____

_____
Signature of the attorney or unrepresented party

_____
Printed name

_____
Address

_____
E-mail address

_____
Telephone number